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UNCLAS SECTION 01 OF 02 KABUL 001905

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TAGS: [PREL](#) [PGOV](#) [SOCI](#) [AF](#)  
SUBJECT: PRT-GARDEZ TAKING AN ACTIVE ROLE IN  
IMPROVING HEALTHCARE IN PAKTIA AND LOGAR PROVINCES

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1.(U) SUMMARY: The PRT-Gardez medical team recently  
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concluded a successful training program for three  
groups of healthcare professionals in trauma  
management, suturing and childbirth techniques, using  
lifelike equipment provided by USAID. PRT-Gardez has  
also used the skills of a female Army medic to advance  
womens health issues. Healthcare is one of the few  
acceptable professions for women in the region.  
Therefore, incorporating continued training for female  
physicians, nurses and midwives has been a priority  
for the PRT medical team. Also, providing treatment  
to women in the villages is one of the few ways for  
the PRT to come into contact with women and provide  
them with direct assistance. With this in mind, PRT-  
Gardez and provincial officials are trying to help  
convert an abandoned ANA hospital into a hospital for  
women. END SUMMARY.

2.(U) On April 20, the PRT-Gardez medical team  
completed medical training for the last of three  
groups to receive continuing education. Using  
expensive mannequins (provided by USAID) that  
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displayed life-like functions, the team provided  
training for 27 physicians, three nurses and 18  
midwives in Paktia and Logar Provinces. The training

was supported by the health directors of both provinces.

3.(U) The first of the three skill lanes, taught at the PRT to three physicians from Paktia Province, focused on casualty assessment and trauma. The second course took place in Logar Province at the Pul-e Alam hospital, training 13 physicians, three nurses, and a dentist in the same three skill lanes. The third took place in the Gardez hospital and included childbirth delivery techniques. Upon completion of the training, the students received certificates from the PRT. (The Logar provincial health director was surprised to find out that he was not exempt from participating in the training and passing his tests to receive his certificate.) The students were visibly enthusiastic about this type of training and many will take these skills into the remote villages where they are assigned to small clinics.

4.(U) FOCUSING ON THE WOMEN: PRT-Gardez has used the opportunity of having a female medic on staff to pay special attention to advancing womens health care in Paktia and Logar Provinces. In the Gardez training program, 19 midwives and eight female physicians were trained. Since arriving in May 2005, the PRT has provided medical attention to 827 women during 12 remote medical humanitarian missions. For many of the women, it was also a rare opportunity to leave the confines of their home. In treating and interacting with the women in remote villages, it was apparent that they experience little positive human interaction.

5.(U) PRT-Gardez has also been working with

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provincial officials to convert an abandoned ANA hospital located in downtown Gardez into a womens hospital. (The ANA have a brand new hospital located at the 203rd Corps headquarters.) In this conservative Pashtun province, there is a stigma attached to to traveling to see a doctor, especially for women. According to Dr. Nazdana, a gynecologist trained in Pakistan, the most pressing womens health care issues are education in prenatal care, and treatment of hepatitis B, anemia and tuberculosis (TB). Often a difficult childbirth is the only reason a woman attempts to visit a hospital. Unfortunately, by the time the birth is complicated and the family realizes the woman should be transported to the hospital, it is often too late. With poor roads and unsanitary conditions, many women die on their way to the hospital. According to Dr. Nazdana, more women would be likely to come to the hospital before childbirth and for other health issues if they had their own facility. Even with problems that affect both sexes, such as TB, women forego treatment because they do not have their own quarantined facility.

6.(U) COMMENT: Programs for continuing education for healthcare professionals have the potential to

o instill a desire to return to the classroom in a profession much neglected and maligned due to war and economic destruction. As donors and NGOs design health care programs, special consideration should be given to cultural fears of being seen seeking medical attention, especially for women, and that women will, for the foreseeable future, require separate facilities and special encouragement through community education to seek medical attention. Currently, Afghanistan has one of the highest maternal death rates in the world. While PRT-Gardez will continue to press for the conversion of the ANA facility into a

womens hospital, it has learned that it will require intervention in Kabul to persuade the Ministry of Defense to transfer ownership of the building to the Ministry of Health. END COMMENT.

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